

04-40053

STATEMENT OF INDIGENCY

Request To Waiver Or Defer Payments

I do hereby swear, under penalty of perjury, that the following information is true and correct.

I, Edwin J. Gunn, do assert that my income prevents me from paying any fees while incarcerated due to the fact that I only earn \$ 00¹ per month at my current work assignment.

By my not being able to afford to pay any unreasonable payments, it adversely affects my ability to research information which could help with any appeal or liberty interest. Any other payments that may have been made in the past have been made with the assistance of family members who cannot afford to help with, nor is it their responsibility to do so.

In the event a full waiver of payments is not feasible, I would agree to, and fully intend to, pay the fees required. However, I would request a deferment of such payments until such time as I am on Supervised Release, at which time I will have an opportunity to obtain meaningful and gainful employment.

Respectfully submitted this 8th day of April, 2004

Name: EDWIN GUNN
Number: 21001-038
F.M.C. Devens, Unit: 03
P.O. Box 879
Ayer, MA 01432

1. Please see copy of account for previous six (6) months.